

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Only for new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No. 42801C Total Pages

First Named Inventor or Application Identifier

Simon

Express Mail Label No.

EV318530761 US

22356

10

WATER-SOLUBLE POLYMERS FOR THE REDUCTION OF DIETARY PHOSPHATE OR OXALATE ABSORPTION

**APPLICATION ELEMENTS**

(See MPEP chapter 600 concerning utility patent application contents.)

1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) - Descriptive title of the Invention	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy
- Cross References to Related Applications	b. <input type="checkbox"/> Paper Copy (identical to computer copy)
- Statement Regarding Fed sponsored R & D	c. <input type="checkbox"/> Statement verifying identity of above copies
- Reference to Microfiche Appendix	
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
3. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets _____]	
4. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages 2]	
a. <input type="checkbox"/> Newly executed (original or copy)	8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) [Note Box 5 below]	9. <input type="checkbox"/> English Translation Document (if applicable)
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	10. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations
5. <input checked="" type="checkbox"/> Incorporation By Reference The entire disclosure of the prior application identified in Box 18 is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	11. <input type="checkbox"/> Preliminary Amendment
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Amend the specification by inserting before the first line, the sentence: "This application is a <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: 09/892,374 _____. If this application claims the benefit of a provisional application, check this box <input type="checkbox"/> This application claims the benefit of U.S. Provisional Application No. ____/_____, filed _____. 19. CORRESPONDENCE ADDRESS	12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	14. <input type="checkbox"/> Associate Power of Attorney
	15. <input type="checkbox"/> Sealed envelope containing confidential information, which Applicants may request to be expunged from the application file.
	16. <input checked="" type="checkbox"/> Authorization for payment of fees and Petition for Extensions of Time.
	17. <input type="checkbox"/> Other: _____

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Amend the specification by inserting before the first line, the sentence: "This application is a  Continuation  Divisional  Continuation-in-part (CIP) of prior application No: 09/892,374 \_\_\_\_\_. If this application claims the benefit of a provisional application, check this box  This application claims the benefit of U.S. Provisional Application No. \_\_\_\_/\_\_\_\_\_, filed \_\_\_\_\_.  
19. CORRESPONDENCE ADDRESS

Customer Number

00109

or  Correspondence address below

NAME

ADDRESS

CITY

STATE

ZIP CODE

Please direct any telephonic communication regarding this application to the undersigned Attorney/Agent for Applicants:

*Elisabeth T. Jozwiak*

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Phone No.: 989-636-2880

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030204  
17224 U.S. PTO

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attorney's Case No. : 42801C

Application of : Jaime simon, alan D. Strickland, Tipton Thomas Masterson, and  
Martha L. Hilton

For: WATER-SOLUBLE POLYMERS FOR THE REDUCTION OF DIETARY  
PHOSPHATE OR OXALATE ABSORPTION

No. of Drawing Sheets: 0

EXPRESS MAIL MAILING LABEL NO. EV318530761US  
DATE OF DEPOSIT: *March 2, 2004*

Sir:

Enclosed for filing is the above-identified application. Please charge the estimated fee to our Deposit Account No. 04-1512. An original and 2 copies of this sheet are enclosed.

A. Basic Filing Fee	<u>\$770.00</u>
Total Number of Claims	<u>5</u>
Less (Basic Fee)	<u>20</u>
B. Extra Claims	<u> </u> x \$ 18.00 = \$ <u> </u>
Total Number Independent Claims	<u>1</u>
Less (Basic Fee)	<u>3</u>
C. Extra Independent Claims	<u> </u> x \$ 86.00 = \$ <u> </u>
D. Multiple Dependent Claims Presented	<u> </u> + \$290.00 = \$ <u> </u>
TOTAL FILING FEE (A+B+C+D) = <u>\$770.00</u>	

If this estimate is incorrect, please charge or credit our account accordingly.

Respectfully submitted,

*Elisabeth T. Jozwiak*  
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THE DOW CHEMICAL COMPANY  
Intellectual Property  
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Midland, MI 48641-1967

Date: 1 March 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant (s): Jaime simon, alan D. Strickland, Tipton Thomas Masterson, and  
Martha L. Hilton

Attorney Docket No.: 42801C

Group Art Unit: Unknown

Filed: Concurrently Herewith

Examiner: Unknown

For: WATER-SOLUBLE POLYMERS FOR THE REDUCTION OF DIETARY  
PHOSPHATE OR OXALATE ABSORPTION

EXPRESS MAIL MAILING LABEL NO. EV318530761US  
DATE OF DEPOSIT: *March 2, 2004*

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**AUTHORIZATION FOR PAYMENT OF FEES  
AND PETITIONS FOR EXTENSIONS OF TIME**

Pursuant to 37 CFR 1.136(a)(3), please treat any concurrent or future reply in this application which requires a petition for an extension of time under 37 CFR 1.136(a)(1) as incorporating a petition for an extension of time for the appropriate length of time. Please charge any fees required under 37 CFR 1.17 in this application to Deposit Account No. 04-1512.

Respectfully submitted,

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Date: 1 March 2004

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